

11/09/13

DCFS Investigation: 2096499A

---

**Allegation:**

Allegation 60- Substantial Risk of Physical Injury/ Environment Injurious to Health and Welfare by Neglect  
(The only risk of harm by neglect the child is really in, is neglect by DCFS to protect her from harm.)

**Date/ Time:**

Intake Date/ Time: 11/09/13 6:48 PM

Report time: 11/09/13 7:52 PM

7:52 pm

**Place:**

OSF Peoria Illinois

530 NE Glen Oak Ave

Peoria, IL 61637

**Mom's Address:**

20509 2300 North Ave Ohio, IL 61349-9155

**Dad's Address:**

1628 First St. Peru IL, 61354

**Who reported:**

Medical Staff from Peoria Pediatric Resource Center

Peoria, IL 61615

**What happened:**

Mom was having trouble finding services in her local area. DCFS was already informed about first onset of concerns where sexual abuse signs were noted by doctor, reported to DCFS, which matter went uninvestigated by DCFS. There is a lack of training among local DCFS, and local level 3 hospitals on how to properly investigate or diagnose sexual abuse claims. They normally send cases like these to other DCFS region. Local area apparently is not the best option for handling sexual abuse investigations appropriate. Mother was told to contact PRC. Mom asked PRC nurse for referral to psychologist for child, and told nurse she did not want an exam. The nurse urged mom to bring child to E.R despite no current concerns which would prompt a physical exam. The nurse claimed they may be able to find signs of abuse still, which later proves to be inaccurate information or advice which was offered to mom by PRC personnel, as signs can often time not be present or clear up after 72 hours. Child was continuing to show psychological signs of trauma. The nurse told mom if she brought child to E.R. that she may obtain a referral to a psychologist or gather information to start forming a paper trail, which the nurse recommend that mom do, given her knowledge about situations like these. The nurse brought up SRA, telling mom she had heard of this in similar situation, and asked mom if this might be of concern. The mom expressed how the father had threatened to kill her and the child, (etc.) and the nurse told mom it sounds like SRA may be possible. Nurse wrote it in the notes to make it sound like mother brought this topic up, but mother had not heard of SRA before this phone call conversation.

**In the DCFS narrative of this report, the essential issues presenting themselves are as follows:**

- **Child shows signs of sexual abuse, which are said to be "HUGE" signs of sexual abuse by medical personnel.**
- **The child's safety is threatened by the father.**
  - Drug use from the father, bringing paraphernalia and illegal drugs around child.
  - Domestic violence concerns from the father.
  - Threats that he was going to murder mom and child.
  - Child showing abuse signs after being with father.
- **DCFS improper procedures.**
  - Gross case mishandling
  - Neglect to investigate properly
  - Neglect to investigate at all
  - Failure to comply with code of ethics and procedures
  - Failure to provide safety from harm to minor child
- **Lack of adequate resources to help child with this kind of investigation.**
  - Lack of resources locally to help provide services suiting to this type of thing.

## DCFS Narrative points and explanations:

---

1. Signs of abuse from child after being with dad.
  2. Doctor reports the child showing signs which are consistent with sexual abuse, which are caused from time spent with father.
  3. DCFS failure to investigate a sexual abuse concern, reported to them regarding the child.
  4. Mother attempted to protect child from said threat of abuse from father.
  5. Child shows possible long-term effects of abuse.
  6. Mom contacted PRC in search of a psychologist who can offer insight as to why the child was displaying the signs she was displaying
  7. PRC Nurse told mother to bring child to hospital for unnecessary exam.
  8. Lack of adequate local resources to supply service to investigate possible sexual abuse threat.
  9. Threat and risk of abuse from father.
  10. Father makes threat of murder to mother and minor child.
  11. Risk of harm to child through dangerous environment is a threat posed by dad.
  12. Concerns of mental illness and alcohol abuse made aware from members of father's family who lived with the father.
  13. Concern violence from father, which poses a threat to the child.
  14. Concern that the father used drugs, and this might be a danger to the minor child
  15. Physician says that symptoms child is said to be showing are "HUGE" signs of sexual abuse.
  16. Report lists false personal and contact information on mother.
  17. It is listed in the report that it's unknown if mom is a credible source.
  18. Mom is corroborated by three medical professionals and documents.
  19. DCFS neglects to provide safety through adequate services to child from threat of harm.
- 

1. Signs of abuse from child after being with dad.
  - a. These signs are consistent with sexual abuse signs according to DCFS webpage:
  - b. It also states that children who are sexually abused may show no physical symptoms.
2. Doctor reports the child showing signs which are consistent with sexual abuse, which are caused from time spent with father.
  - a. On 8/23/13, A doctor from Ottawa Illinois saw that the child was showing some of these physical symptoms consistent with sexual abuse as mentioned above, and that this was documented and reported to DCFS.
  - b. The child was seen there instead of Peoria, due to PRC telling mom the child would have to wait one week before being seen there, which was too long.
  - c. The Ottawa Doctor told mom that she did not specialize in sexual abuse exams, and could not offer knowledge as to whether she had been abused for certain or not, but that she could document her signs, and they did match signs which are said to be that of sexual abuse. The doctor said the most she could do was list her symptoms, but not diagnose abuse as her legal capabilities due to lack of training in that area, were a limitation. She said it did appear tampered with though and that she would call DCFS.
3. DCFS failure to investigate a sexual abuse concern, reported to them regarding the child.
  - a. DCFS is unable to find history of the above reported incident, because they did not investigate.
  - b. Mom never received a call, or feedback from DCFS.
  - c. They never did an investigation.
4. Mother attempted to protect child from said threat of abuse from father.
5. Child shows possible long-term effects of abuse.
  - a. Symptoms of abuse which were not present before unsupervised time with father, remained problematic, and persisted despite mother's attempt to provide supervised or limited unsupervised visitation.
  - b. The signs of abuse which were affecting the child's ability to function as she did before the alleged abusive incidents took place.
6. Mom contacted PRC in search of a psychologist who can offer insight as to why the child was displaying the signs she was displaying.
  - a. This is what prompted mom to call the PRC, as she was looking for insight from a child psychologist so that she wasn't making her own assumptions.

7. **PRC Nurse told mother to bring child to hospital for unnecessary exam.**
  - a. The Nurse on the phone, who appears to be the reporter in this said document advised mom to bring the child to the E.R. and told mom that an appointment with a psychologist could be made there.
  - b. The mom didn't want to bring child to the E.R. though but the Nurse insisted and mom did not want to refuse medical advice, as she feared that would make her look like a bad mom.
8. **Lack of adequate local resources to supply service to investigate possible sexual abuse threat.**
  - a. The mother tried to obtain services from Perry, a local hospital but they weren't able to help as they were not trained to handle sexual abuse cases like this and told mom to call PRC, and told her that they send things like these out of town to level 1 hospitals trained in the area of sexual abuse.
9. **Threat and risk of abuse from father**
  - a. There were concerns of cult activity from the father.
  - b. This was not initially reported by mom, but when the mom was trying to talk her way out of bringing the child to the E.R. as she essentially was only calling to see if she could make an appointment with a psychologist, the Nurse told mom that the details of concern which she describes are consistent with SRA, or cult activity which they sometimes have seen in similar cases, and asked mom if this was a concern.
  - c. Mother continued to express the father's telling her of his satanic interests, cult friends, satanic based music groups the father has played in, the drug use, threats of murder, etc.
  - d. The father's friends from his band urged the father to kill the mom, while she was standing there listening to the conversation.
10. **Father makes threat of murder to mother and minor child.**
  - a. The father had made threats of murder (Premeditation, or attempted homicide) to the mother and minor child.
  - b. There were multiple incidents where the father expressed desires to murder the mother, and in one instance, he explained in great detail, his plans to carry this out, where he told the mom he was going to murder her, chop her body into tiny pieces and hide them at her friends, house, and other places, etc.
  - c. These threats were reported to police. Mom also confided in the father's mother, Mary Kramer one day while sitting on the couch in the shared home before the split, about his threats of murdering her. His mother then expressed how she believed he suffered from Schizophrenia which runs predominately in the males within her family. Mom did not know the father potentially suffered from this until after the child was born.
  - d. Three months after the child was born, the father voiced a desire to kill the innocent one, while chanting, "I smell the blood of an innocent one" at the end of a song he wrote and video recorded, while he sent the child to a stranger on one of his visitation days.  
Link here:
11. **Risk of harm to child through dangerous environment is a threat posed by dad.**
  - a. Threat of dangerous environment to child is a risk is posed by father, not mother.
12. **Concerns of mental illness and alcohol abuse made aware from members of father's family who lived with the father.**
  - a. Mental illness and alcohol abuse made aware from members of father's family who were in the home with father and around said minor child.
  - b. Alcoholism is a concern from the father's dad, child's paternal grandfather, and mental illness form one of the other family members residing in the home with the father at this time. Mike Mignone, the father's uncle, Mary (Mignone) Kramer's brother, who lived at the same place where father was having child during his said visitation times, was said to be full blown mentally retarded, incapable of providing from oneself, heavily medicated and suffering from catatonic Schizophrenia, psychosis among other things.
  - c. This is a threat in itself to a dependent, where mental illness might take a turn where the child can be injured if alone with him, or an outburst should strike.
13. **Concern violence from father, which poses a threat to the child.**
14. **Concern that the father used drugs, and this might be a danger to the minor child**
  - a. The father not only used drugs in his home, which the mom did not approve of, it goes along with his musician, druggie, party lifestyle, but he would go as far as to bring drugs on him, alongside smoking devices into the child toy play area at the mother's father's home where supervised visitations were taking place. The father showed no regard for the child. It was unknown why he would bring drugs on him around the minor child. They are illegal, and he is risking putting himself away somewhere, unable to tend to the child's needs which is child endangerment in itself.
15. **Physician says that symptoms child is said to be showing are "HUGE" signs of sexual abuse.**
16. **Report lists false personal and contact information on mother.**
  - a. SACWIS Lists Julia's Birthday at 4/17/91, but Julia's birthday is 4/14/91
  - b. DCFS writes (815) 872-6703 as mother's phone but it might have been (815)303-5454.

**17. It is listed in the report that it's unknown if mom is a credible source.**

- a. That is no reason to twist the report which shows father is potential threat of harm to child, to be made about mom, who is the child's only protective parent if father is posing a threat like this document portrays.
- b. The mother's credibility can be investigated more by DCFS, instead of not giving her the benefit of the doubt. That is no reason to ignore threat of harm or risk posed by the father.

**18. Mom is corroborated by three medical professionals and documents.**

- a. The doctor from Ottawa on 8/23/13 documented the child's symptoms, and although she had no legal training to diagnose sexual abuse, the signs matched those listed on the DCFS website, where it states child may be sexually abused with no physical signs present, showing this is more concerning than a situation where no signs were present. This was ignored and uninvestigated by DCFS.
- b. The reporting doctor writes although the mother's credibility is unknown, she is concerned for the minor child, given the causes of concern and possible threat to her by father, which was explained to her.
- c. This proves that mother was not unreasonable at being concerned for her daughter about these things as a medical professional saw these of equal concern.
- d. Another doctor from OSF states that the signs which are describes, and some which were documented early by above said doctor from 8/13/13 incident, are "Huge" signs of sexual abuse, and this opinion is coming from trained medical personnel. This eliminated the possible threat due to uncertainty that mom was a credible source.

**19. DCFS neglects to provide safety through adequate services to child from threat of harm.**

- a. Medical documents record the signs, which mom say the child was experiencing, and was documented by medical professional from OSF 8/23/13. This was uninvestigated by DCFS.
- b. This shows a general lack of concern from DCFS, lack of authority, not handling the investigation properly, lack of investigation into the first matter at all, disregard for the child general wellness, and bordering along the lines of criminal child endangerment from not investigating first report, leaving sexual abuse to possibly go on without anything being done to resolve it, and making the threat of harm from dad, about mom, when mom was only trying to protect the minor child.